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PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

| | | | | | | | |
|---|--|-------|--|---|--|-------------|--|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Harry F. | | | | Contopanagos | | | |
| Inventor's Signature | | | | Date | | | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | ZIP | | Country | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| John F. | | | | Visher | | | |
| Inventor's Signature | | | | Date | | | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | ZIP | | Country | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Vladimir | | | | Rokhlin | | | |
| Inventor's Signature | | | | Date | | | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | ZIP | | Country | |

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| | | | |
|--|-------------------------------|----------------------|---------|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="checked" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Attorney Docket Number | | HRL053 |
| | First Named Inventor | | Ottusch |
| | COMPLETE IF KNOWN | | |
| | Application Number | / | |
| | Filing Date | | |
| | Group Art Unit | | |
| | | Examiner Name | |

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application or PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--|---------------------------------|--------------------------------------|
| | | |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number OR ☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

| Name | Registration Number | Name | Registration Number |
|-----------------|---------------------|------|---------------------|
| Cary Tope-McKay | 41,350 | | |

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

| | | | | | |
|---------|----------------------------------|-----------|----------------|-----|----------------|
| Name | Cary Tope-McKay | | | | |
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| Address | | | | | |
| City | Malibu | State | CA | ZIP | 90265 |
| Country | USA | Telephone | (310) 291-0390 | Fax | (310) 943-2736 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | | | |
|--|------------------------|---|-----|---------|-------------|
| Name of Sole or First Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle (if any)) | | Family Name or Surname | | | |
| John Jacob | | Ottusch | | | |
| Inventor's Signature | <i>John J. Ottusch</i> | | | Date | 15 Jun 2001 |
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| Post Office Address | | | | | |
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| | | Country | USA | | |

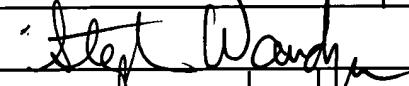
☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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Page 1 of 1

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|--|---|-------|----|---|---------|-------------|----|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Stephen M. | | | | Wandzura | | | |
| Inventor's Signature |  | | | Date | 6/15/01 | | |
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| Post Office Address | | | | | | | |
| City | Agora Hills | State | CA | ZIP | 91301 | Country | US |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| | | | | | | | |
| Inventor's Signature | | | | Date | | | |
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